STATE OF CALIFORNIA

AIR ECONOMIZER CONTROLS ACCEPTANCE

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ENERGY COMMISSION
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CALIFORNIA	ENERGY COMMISSION	

		CH-05-A (Revised: 01/19)					CALIFOR	RNIA ENERGY COMMISSION
	CERTIFICATE OF ACCEPTANCE NRCA-MCH-05-A							
Air E	Air Economizer Controls Acceptance (Page 1 of 3)						(Page 1 of 3)	
Project	Project Name: Enforcement Agency: Pe					Permit Number:		
Project Address:			City:			Zip Code:		
System	Name or	Identification/Tag:			System Loca	ation or Area Served	:	
					1			
		e Results:		w.	Eı	nforcement A	gency Use: Checked b	y/Date
AUT	JMAII	ED ("Complies" or "Does Not C	omply	<u> </u>				
		Construction inspection and fu						
Inter		pace-cooling loads. Intended to Acceptance for each system the				•		mission. Submit one Certificate of
		acceptance for each system the	at ilius	t demonstrate con	прпапсе.	<u>[NA7.5.4, 314</u>	0.4(e)	
Δ (netru	ction Inspection						
Buildin			Floor:			Room/Area/Zone:		Control/System:
Prior	to Fur	nctional Testing, verify and do	cument	t all of the followin	 1g			
						o following)		
1.	-	ired documentation must be a						
	a.	All documentation shipped v				•		
2.								and Climate Zone where installed
	(cnec	ck one compliance path and all	аррис	able NOTES). (Tar	ole 140.4-			Economizer off when :)
	Devic	ce Type	Clim	ate Zone	F.	quation	a righ Limit Setting (E	Description
	Devic	е туре		1, 3, 5, 11-16	T _{OA} > 7	-	Outdoor air tompor	
		Fixed Dry Bulb		1			Outdoor air temperature exceeds 75°F. Outdoor air temperature exceeds 73°F.	
t-E)				2, 4, 10	T _{OA} > 73°F		 	
40.4			Ш	6, 8, 9	T _{OA} > 7	71°F	Outdoor air temper	ature exceeds 71°F.
le 1				7	T _{OA} > 6	59°F	Outdoor air temperature exceeds 69°F.	
(Tab				1, 3, 5, 11-16	T _{OA} > T	RA	Outdoor air temper temperature.	ature exceeds return air
Compliance Path for Required High Limit (Table 140.4-E)				2, 4, 10	T _{OA} > T	T _{RA} - 2°F	Outdoor air temper temperature minus	ature exceeds return air
ligh		Differential Dry Bulb		6.0.0	T . T	405		ature exceeds return air
- Pe				6, 8, 9	T _{OA} > T	RA-4 F	temperature minus	
uir				7	$T_{OA} > T$	T _{RA} - 6°F	-	ature exceeds return air
Rec		e: 1e il 1					temperature minus	
for		Fixed Enthalpy and Fixed Dry-bulb	All		-	28 Btu/lb or 75°F		by exceeds 28 Btu/lb of dry air or
ath		May not be used in any Climate Zone in California unless approval for use is						
e P;		Others such as Dew Point, Fi					rgy Commission Execu	
anc		Enthalpy, and Differential Enthalpy Controls APPROVAL MUST BE ATTACHED.						
npli		NOTE: Devices with selectable (rather than adjustable) setpoints must be set to within 2°F and 2 Btu/lb of the setpoint listed.						
Con		NOTE for Fixed Enthalpy At altitudes substantially different than sea level, the Fixed Enthalpy limit value must be set to the						
		and Fixed Dry-hulb devices enthalpy value at 75 F and 50% relative numidity. As an example, at approximately 6,000 foot						
		elevation, the fixed enthalpy limit is approximately 30.7 Btu/lb.						
3.	Econ	omizer reliability features are	presen	t as specified in th	e Energy	Code (check a	all of the following): (N	NA 7.5.4.1(h), §140.4(e)2D)
	a.	5-year manufacturer warra	nty of	economizer assem	nbly <u>(§140</u>	0.4(e)2Di)		
							, return air damper, d	rive linkage, and actuator) have
	b.	been tested and are able to open and close against the rated airflow and pressure of the system for 60,000 damper opening and						
		closing cycles. (§140.4(e)2[
	c.	The outdoor air and return air dampers have a maximum leakage rate of 10 cfm/sf at 250 Pascals (1.0 of water) when tested in compliance with AMCA Standard 500-D. (§140.4(e)2Diii)						
\vdash						ivad day bulb	than it must have an	adjustable setneint
	d.	If the high-limit control is fixed dry-bulb or fixed enthalpy + fixed dry-bulb, then it must have an adjustable setpoint. (NA7.5.4.1(b), §140.4(e)2Div)						
	i	(NA7.5.4.1(b), §140.4(e)2Div)						

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AIR ECONOMIZER CONTROLS ACCEPTANCE

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CEC-NRCA-MCH-05-A (Revised: 01/19)
CERTIFICATE OF ACCEPTANCE

CALIFO	RNIA ENERGY COMMISSION
	NRCA-MCH-05-A
	(Dago 2 of 2)

Air E	conc	mizer Cor	ntrols Acceptance	9				(Page 2 of 3)		
Project Name:			Enforcement Agency:		Permit Number:					
Project Address:			City: 2		Zip Code:					
System	Name o	or Identification/	Tag:		System L	ocation or Area Served:				
					<u>I</u>					
A. Co	onstru	iction Inspe	ection							
Buildin	Building: Room/Area/Zone: Control/System:									
	e.	1 1				ust be calibrated as follows (check all over the range of 40°F to 80°F	of the following): (140.4(e)2Dv)		
				to ±3 Btu/lb over the range						
				RH) accurate to ±5% over t						
	f.					zer instruction materials that plotted	data used for econo	mizer control		
	1.					g calibration. (NA7.5.4.1(d) & (e), §1				
	g.		_	it control shall be located t 7.5.4.1(c), §140.4(e)2Dvii)	o preve	ent false readings, including but not li	mited to being prop	erly shielded		
4.	Ec	onomizer a	dditional features	(check all of the following)	:					
	a. Economizer damper moves freely without binding. (NA7.5.4.1(f))									
	b. Unitary systems with an economizer have control systems, including two-stage or electronic thermostats, that cycle compressors off when economizers can provide partial cooling (NA7.5.4.1(g))									
	System has return fan speed control, relief damners, or dedicated relief fans to prevent building over pressurization in full									
	□ e. For systems with non-DDC controls, manufacturer's startup and testing procedures have been applied. (NA7.5.4.1(k))									
Construction Inspection Compliance Results: AUTOMATED ("Complies" or "Does Not Comply")										
		nal Testing	<u> </u>							
Buildin	Building: Floor: Room/Area/Zone: Control/System:									
Step	1:	Disable de	mand control vent	ilation systems (if applicab	ole) (NA	7.5.4.2 Step 1)				
	Step 2: Enable the economizer and simulate a cooling demand large enough to drive the economizer fully open (record all of the following):									
	Economizer damper modulates 100% open and that the return air damper modulates 100% closed. P/F									
		(NA7.5.4.2 Step 2a)					P/F			
		b. All applicable fans and dampers operate as intended to maintain building pressure. (NA7.5.4.2 Step 2b) P/F c. The unit heating is disabled (if applicable). (NA7.5.4.2 Step 2c) P/F								
Step	Step 3: Disable the economizer and simulate a cooling demand (record all of the following): (NA7.5.4.2 Step 3)									
	a. Economizer damper closes to its minimum position. (NA7.5.4.2 Step 3d) P/F									
		b.								
		c.				ability). (NA7.5.4.2 Step 3f)				
Step	4:	If unit has	heating capability,	·	id and s	et economizer so that it is capable of	operating (i.e., actu	•		
		a.		minimum position. (NA7.5				P/F/NA		
		b.		er opens. (NA7.5.4.2 Step				P/F/NA		

Turn off the unit. (NA7.5.4.2 Step 5) Record if the Economizer damper closes completely. (NA7.5.4.2 Step 5i)

Restore demand control ventilation systems (if applicable) and remove all system overrides initiated. (NA7.5.4.2 Step 6)

Functional Test Compliance Results: AUTOMATED ("Complies" or "Does Not Comply")

Step 5:

Step 6:

P/F

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AIR ECONOMIZER CONTROLS ACCEPTANCE

IFORNIA ENERGY COMMISSION	

CLC-INCA-WCT-05-A (Nevised: 01/19)	CALII OI	TIMA LINERO I COMMINISSION		
CERTIFICATE OF ACCEPTANCE NRCA-MCH-C				
Air Economizer Controls Acceptance		(Page 3 of 3)		
Project Name:	Enforcement Agency:	Permit Number:		
Project Address:	City:	Zip Code:		
System Name or Identification/Tag:	System Location or Area Served:			

DOCUMENTATION AUTHOR'S DECLARATION STATEMENT					
1. I certify that this Certificate of Acceptance documentation is accurate and complete.					
Documentation Author Name: Documentation Author Signature:					
Documentation Author Company Name:	Date Signed:				
Address:	ATT Certification Identification (If applicable):				
City/State/Zip:	Phone:				
·					

FIELD TECHNICIAN'S DECLARATION STATEMENT

I certify the following under penalty of perjury, under the laws of the State of California:

- The information provided on this Certificate of Acceptance is true and correct.
- I am the person who performed the acceptance verification reported on this Certificate of Acceptance (Field Technician).
- The construction or installation identified on this Certificate of Acceptance complies with the applicable acceptance requirements indicated in the plans and specifications approved by the enforcement agency, and conforms to the applicable acceptance requirements and procedures specified in Reference Nonresidential Appendix NA7.
- I have confirmed that the Certificate(s) of Installation for the construction or installation identified on this Certificate of Acceptance has been completed and signed by the responsible builder/installer and has been posted or made available with the building permit(s) issued for the building.

Field Technician Name:	Field Technician Signature:		
Field Technician Company Name:	Position with Company (Title):		
Address:	ATT Certification Identification (if applicable):		
City/State/Zip:	Phone:	Date Signed:	

RESPONSIBLE PERSON'S DECLARATION STATEMENT

I certify the following under penalty of perjury, under the laws of the State of California:

- 1. I am the Field Technician, or the Field Technician is acting on my behalf as my employee or my agent and I have reviewed the information provided on this Certificate of Acceptance.
- I am eligible under Division 3 of the Business and Professions Code in the applicable classification to accept responsibility for the system design, construction or installation of features, materials, components, or manufactured devices for the scope of work identified on this Certificate of Acceptance and attest to the declarations in this statement (responsible acceptance person).
- The information provided on this Certificate of Acceptance substantiates that the construction or installation identified on this Certificate of Acceptance complies with the acceptance requirements indicated in the plans and specifications approved by the enforcement agency, and conforms to the applicable acceptance requirements and procedures specified in Reference Nonresidential Appendix NA7.
- I have confirmed that the Certificate(s) of Installation for the construction or installation identified on this Certificate of Acceptance has been completed and is posted or made available with the building permit(s) issued for the building.
- I will ensure that a completed, signed copy of this Certificate of Acceptance shall be posted, or made available with the building permit(s) issued for the building, and made available to the enforcement agency for all applicable inspections. I understand that a signed copy of this Certificate of Acceptance is required to be included with the documentation the builder provides to the building owner at occupancy.

Responsible Acceptance Person Name:	Responsible Acceptance Person Signature:		
Responsible Acceptance Person Company Name:	Position with Company (Title):		
Address:	CSLB License:		
City/State/Zip	Phone:	Date Signed:	